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## Endotracheal Tube

**Intended Use:** To be used by qualified medical personnel for oral or nasal intubation and for airway management



### WARNING:

Contact with electrosurgery electrodes or laser surgery beams must be avoided because PVC will produce toxic fumes in air or ignite in an enriched oxygen environment.

Deflate cuff prior to re-positioning the tube. Movement of the tube with cuff inflated could result in mucosal injury or damage to the cuff.

Do not overinflate cuff. Over-inflation can result in tracheal damage, rupture of the cuff with subsequent deflation, or cuff distortion which may lead to airway blockage.

Do not use lubricants with a petroleum base.

**DISPOSAL:** Dispose of tracheal tube according to local regulations

**STERILE:** Unless packaging is open or damaged

**Manufactured for**

MedSource  
8600 Shelby Court  
Chanhassen, MN 55317 USA  
Made in China

### CAUTION:

Federal law (US A) restricts this device to sale by or on the order of a physician.

Store unopened packaged in clean, dry conditions away from light and avoid freezing and excessive heat.

Do not inflate cuff with a measured volume of air, or by feel of pressure from the syringe, because little resistance should be felt during inflation.

When the patient's position is altered after intubation, it is essential to verify that the tube position remains correct.

Use of Minimal Occluding Volume technique can reduce occurrence of many adverse events associated with the use of cuffed tracheal tubes.

### Directions:

**Tube Size Selection:** Select tracheal tube size based on acceptable medical practices.

**Handling:** Remove endotracheal tube assembly from its protective pouch taking care to maintain the sterile barrier.

**Inspection:** Prior to use, carefully inspect the assembly components: ET Tube, 15mm connector, and if present cuff and stylet.

**Cuff Inflation Testing:** Test-inflate cuff using a luer tip syringe (not included). Completely deflate cuff after test-inflation.

**Intubation Procedures:** Intubate following currently accepted medical techniques. Inflate cuff (when present) with sufficient air to provide an effective seal at the desired lung inflation pressure. Remove luer tip syringe from the inflation valve and fit the dust cap to effect closing of the one-way valve.

**Extubation Procedures:** Before extubation, completely deflate cuff (using a luer tip syringe) until a definite vacuum is noted. Extubate using currently accepted medical techniques.

APPLY LABEL HERE

PEEL BACK TO OPEN

